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Preparing for Third Molar Removal

Clinical Center

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

National Institutes of Health

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Your initial appointment is scheduled for:

Date _____

Time_____

Please go to the Admissions Section first, then go to the Dental Clinic for an x-ray. After the x-ray has been taken, proceed to the Pain Research Clinic on the 3rd floor.

Preparing for Third Molar Removal

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This booklet was prepared by the staff of the National Institutes of Health (NIH) Pain Research Clinic to acquaint you with what to expect during third molar (wisdom tooth) removal. The booklet will explain what researchers can learn from this procedure and will give you advice on how to take care of yourself after surgery. If you have any questions about this procedure, please feel free to ask the clinic staff. They will be happy to speak with you.

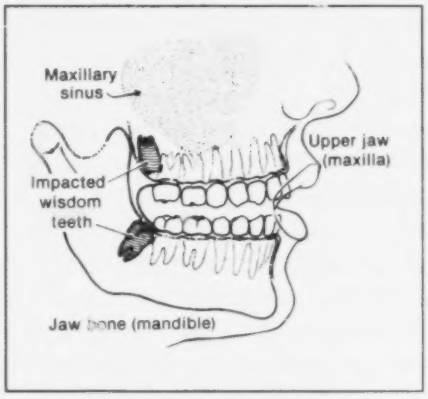
The Pain Research Clinic

Pain is the most common symptom for which people seek dental or medical care. It is also one of the most difficult conditions to understand and treat. To address this problem, NIH organized the NIH Pain Research Clinic, the country's first pain clinic devoted exclusively to research. This clinic is directed by the National Institute of Dental Research which has had a long-standing interest in pain.

The NIH Pain Research Clinic is a joint effort between researchers and dental and medical professionals who work together to find new ways to assess, diagnose, and treat pain.

Reasons for removing third molars

Third molars are usually removed when they are impacted. Teeth are impacted when there is not enough room for them in the mouth. Removal should take place before the surrounding jaw bone has hardened and before any major changes have taken place in the jaw.



Impacted Wisdom Teeth

Other reasons why third molars would be removed are the following:

- recurrent infections or cysts around the tooth that cause bone loss and weakening of the jaw bone
- third molars causing damage to an adjacent tooth
- third molars crowding other teeth, causing them to shift out of line.

Third molars are usually removed before people reach the age of thirty.

What can be learned from third molar removal?

Having third molars removed is more than just a minor operation. When performed at the Pain Research Clinic, this relatively simple procedure yields a wealth of information about the effects of surgery on the body. Scientists use the extraction of wisdom teeth as a model for studying pain because it is applicable to the kind of pain that results from surgery on other parts of the body.

Since they are usually healthy, people undergoing third molar removal are good candidates for pain studies. Before surgery, these people feel anxiety similar to all those scheduled for surgery. During the operation, researchers can measure the effect of stress caused by surgery. After the operation, various drugs can be given to find out which works best to reduce postoperative pain. The details of the study in which you will participate will be explained when you are first seen in the clinic.

Directions to the Pain Research Clinic

Located in Bethesda, Maryland, NIH is just inside the Capital Beltway (Interstate 495). You may wish to refer to the maps included with this booklet for directions. If you are driving to NIH, you can take exit 36 (south) onto Old Georgetown Road. When you are on Old Georgetown

Road, continue for 2 miles until you see the firehouse on your left. Turn left onto Center Drive, the first entrance into the NIH campus. Proceed on Center Drive past the Clinical Center, a large red brick and glass building. Take the first right onto Memorial Road and then the second right into the Clinical Center garage. Stop at the police booth and inform the officer that you have an appointment at the Pain Research Clinic. You will then be allowed to park. Once you have parked, take the elevator to the first floor of the Clinical Center. Go to the admissions section to obtain the necessary paperwork before you proceed to the clinic.

If you are taking the Metro, get off at the Medical Center stop on the red line and proceed north to Center Drive. Follow Center Drive as it curves west towards the Clinical Center. A landmark that may help orient you will be Building 31 which you will pass on your right as you walk towards the Clinical Center. Continue on Center Drive until you see the red brick and glass building which is the Clinical Center. Walk through the glass sliding doors and go to the admissions section located ahead towards your right.

Your initial evaluation

When you have completed the admissions process, take your chart and proceed to the Dental Clinic to have a dental x-ray taken. If you are sure that your dentist has already sent in a panoramic radiograph (an x-ray of the teeth on your upper and lower jaws) you may go directly to the third floor clinic.

After your x-ray has been taken, bring it with your chart when you go to the third floor clinic. Check in with the receptionist and wait until another staff member comes to talk with you. While you are waiting, complete the forms that the receptionist gives you. Please complete the medical history form accurately. If you are not sure of some answers, please discuss

your questions with the nurse or dentist who will see you shortly.

When the nurse or dentist comes out to greet you, you will be taken back to an examination room where your medical history will be reviewed, and the surgery and research study will be explained. If you are unable to keep this initial evaluation appointment, please call us in advance at 496-5483.

Complications from surgery

As with any operation, complications are possible during third molar removal. These complications include delayed healing of the extraction site (dry socket), infection, perforation of the lining of the sinuses located in the upper jaw, damage to the teeth, or temporarily or permanently altered sensation of the lower lip, chin, or tongue.

A rare complication of oral surgery is a fractured jaw. There may also be side effects from the local anesthetic used during surgery. Possible, though rare, adverse reactions include temporary facial paralysis, a bruise, injection into a vein, and allergic reactions.

Some patients have experienced one or more of the following transient adverse effects from the pain medication used after surgery: drowsiness, dizziness, nausea, vomiting, and allergic reactions.

Things to remember before surgery

- Do not eat or drink anything after midnight of the night before surgery. This is a very important rule to follow. If you eat or drink before surgery, serious complications could result.

- After surgery, you will remain in the clinic for 2 to 6 hours. The exact time will vary depending on the study in which you take part.

Things to remember for the day of surgery

- Report directly to the third floor clinic at the time scheduled for you. When you have signed in at the reception desk, you will be seen by your primary nurse. Your primary nurse will take care of you from pre-operative preparation to discharge after your surgery.
- Please bring any medication you are currently taking.
- If possible, wear short sleeves.
- After surgery, you will remain in the clinic for 2 to 6 hours. The exact time will vary depending on the study in which you take part.
- An adult must be available both to pick you up in the clinic after surgery and to drive you home when you are discharged from the clinic.

Events on the day of surgery

Before surgery

Your primary nurse will ask you some routine questions and take your vital signs (temperature, pulse, respiration rate, blood pressure). If you have any questions or concerns about your surgery, please ask them at that time.

You will be taken to one of the operatories where the surgery will be performed. An I.V. (intravenous) line will be placed in your arm. This device will enable the staff to obtain blood samples and administer medications without having to give you many needle sticks. The I.V. will remain in place after surgery or until the necessary blood samples have been drawn.

After surgery and throughout the day

After surgery, you should plan to rest at home for the remainder of the day. If you

have been given a sedative, lie down at home until it has completely worn off. Reading, watching television, and taking a nap are examples of quiet activities that you may enjoy until bedtime.

The sedative that you received during surgery, as well as certain medicines, may cause drowsiness and dizziness after the operation. Because of these effects, do not drive a car, operate machinery, drink alcoholic beverages, or expose yourself to safety hazards.

Proper mouth care after oral surgery will speed healing and reduce complications. The following suggestions are offered to help you recover quickly and safely from oral surgery.

Bleeding

Expect some bleeding to occur: oozing may continue for 24 hours. To help stop the bleeding, gently bite on folded gauze for an hour as needed during the first 24 hours. If bleeding has not subsided after 24 hours, contact the clinic. So that bleeding does not worsen, engage in nonstrenuous, quiet activities.

Protect the blood clot.

Do not rinse, spit, brush your teeth, or use a mouthwash. Avoid excessive activity, and observe the following guidelines:

- Do not pick at the surgical site.
- Do not use a straw.
- Do not use a Water Pik.
- Do not drink alcoholic or carbonated beverages.
- If you smoke, do not do so for 24 hours or longer.

Smoking will greatly increase your postoperative problems.

Swelling

Expect swelling, especially if your surgery was difficult. You may even see some bruising on your cheek. Use ice bags immediately and for the next 24 hours. Apply them at regular intervals: put the ice bags on for 30 minutes and take them off for 15 minutes.

Keep your head elevated on two or three pillows while you rest or sleep. The swelling will peak in 2 to 3 days and should subside after that. If you notice any increase in swelling after the first 48 hours, a fever, a bad taste in your mouth, or pus, you may have an infection. Call the clinic and arrange to be seen that day.

Pain

After oral surgery, you may feel some discomfort. It can be eased by taking pain medications as directed. Take the first dose of medication when your lower lip begins to tingle or when you begin to feel pain. Take your next dose 4 to 6 hours later as prescribed. By taking your medication every 4 to 6 hours as prescribed, you will be able to stay ahead of your pain. Stomach discomfort can be avoided by eating before you take the pain medication.

Eating

It is very important to eat and drink enough after oral surgery. The first day, eat such cool, soft foods as instant breakfasts, milkshakes, yogurt, and applesauce. The next day, advance to semisoft foods when you can tolerate them. Avoid tough, hard, chewy, hot, and spicy foods.

The day after and the week following surgery

These guidelines will help you continue your recovery.

Ice bags

If circumstances permit, continue using ice bags the morning after surgery. Do not use them for a longer period.

Oral hygiene

Brush your teeth as best you can after meals and at bedtime. Rinse your mouth with warm salt water (1/2 teaspoon table salt in an 8-ounce glass of warm water) every 2 hours and after meals. Brushing and rinsing will help maintain oral hygiene.

Food

Return to your normal diet as soon as you can. While you may have some stiffness in your jaws for several days, chewing will help loosen your jaw muscles.

Medications

Continue taking your pain medications as prescribed. Since the pain should begin to diminish after 2 days, take pain medication only when needed. *Note: Certain medications may cause sleepiness and dizziness. DO NOT operate machinery, drive a car, drink alcohol, or expose yourself to safety hazards. If you feel an increase in pain after 3 or 4 days, call the clinic.*

Blood

If you see any blood in nasal secretions or after blowing your nose, call the clinic.

Injection site

If medication was given to you through your vein and you have redness, pain, irritation, or hardness at the injection site, wrap the area with a warm, moist towel and call the clinic for further instructions.

Stitches

____ Stitches were used. You must keep your appointment to have them removed.

Date_____

Time_____

____ You have dissolvable stitches. They will dissolve in 3 to 14 days. You do not have to return to the clinic to have these stitches removed.

____ No stitches were used.

If you have any questions or problems, please do not hesitate to call the clinic at 496-5483 or 496-6695. After 4:30 p.m. and on weekends, call the NIH operator at 496-4000 and ask for the *Pain Research Clinic* dentist on call.

Where applicable, brand names of commercial products are provided only as illustrative examples of acceptable products, and do not imply endorsement by NIH; nor does the fact that a particular brand name product is not identified infer that such product is unsatisfactory.

Questions

Answers

Referring Patients for Third Molar Removal at NIH

The Pain Research Clinic is currently accepting patients for research studies involving the extraction of third molars. If you know people who would like to have their third molars removed as part of our research, please give them this form. Their dentist or physician can complete it and send a letter of referral to the clinic.

Patient's Name

_____

Patient's Address

_____

Patient's Home Phone _____

Patient's Work Phone _____

Referring Dentist

_____

Referring Dentist's Address

_____

Office phone _____

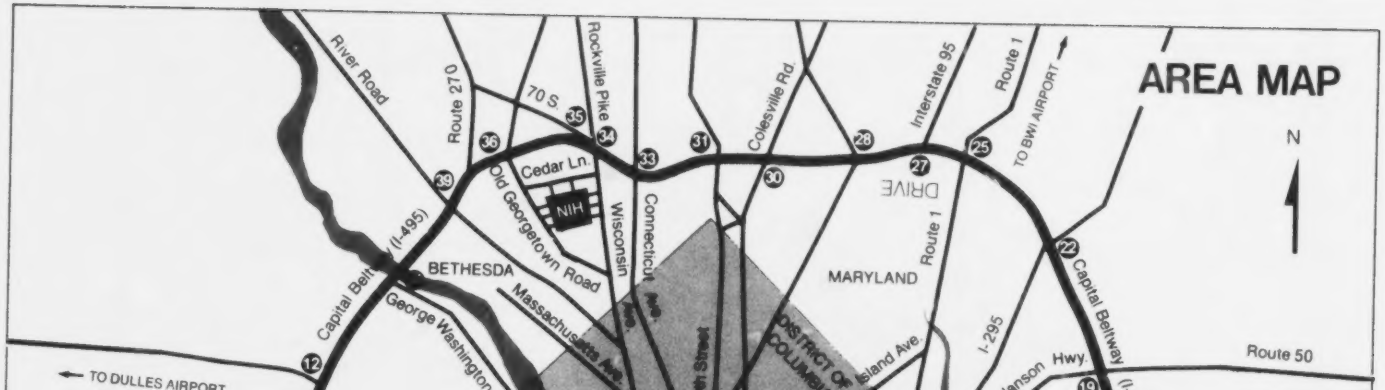
Signature _____

Date _____

Mail this form to the following address:

NIH Pain Research Clinic
Building 10, Room 3C403
National Institute of Dental Research
Bethesda, Maryland, 20892

Phone referrals may be made by calling 301-496-5483.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Colesville Rd.
Interstate 95
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BETHESDA
George Washington
Massachusetts Ave.
MARYLAND
Route 1
I-295
Island Ave.
Capital Beltway
Route 50
TO DULLES AIRPORT

Interstate 66
Lee Highway
Routes
29 and 211
Arlington Boulevard
Route 50
Shirley Memorial Highway
I-95
Capital Beltway (I-495)
Jefferson Davis Highway
Vernon Memorial Highway
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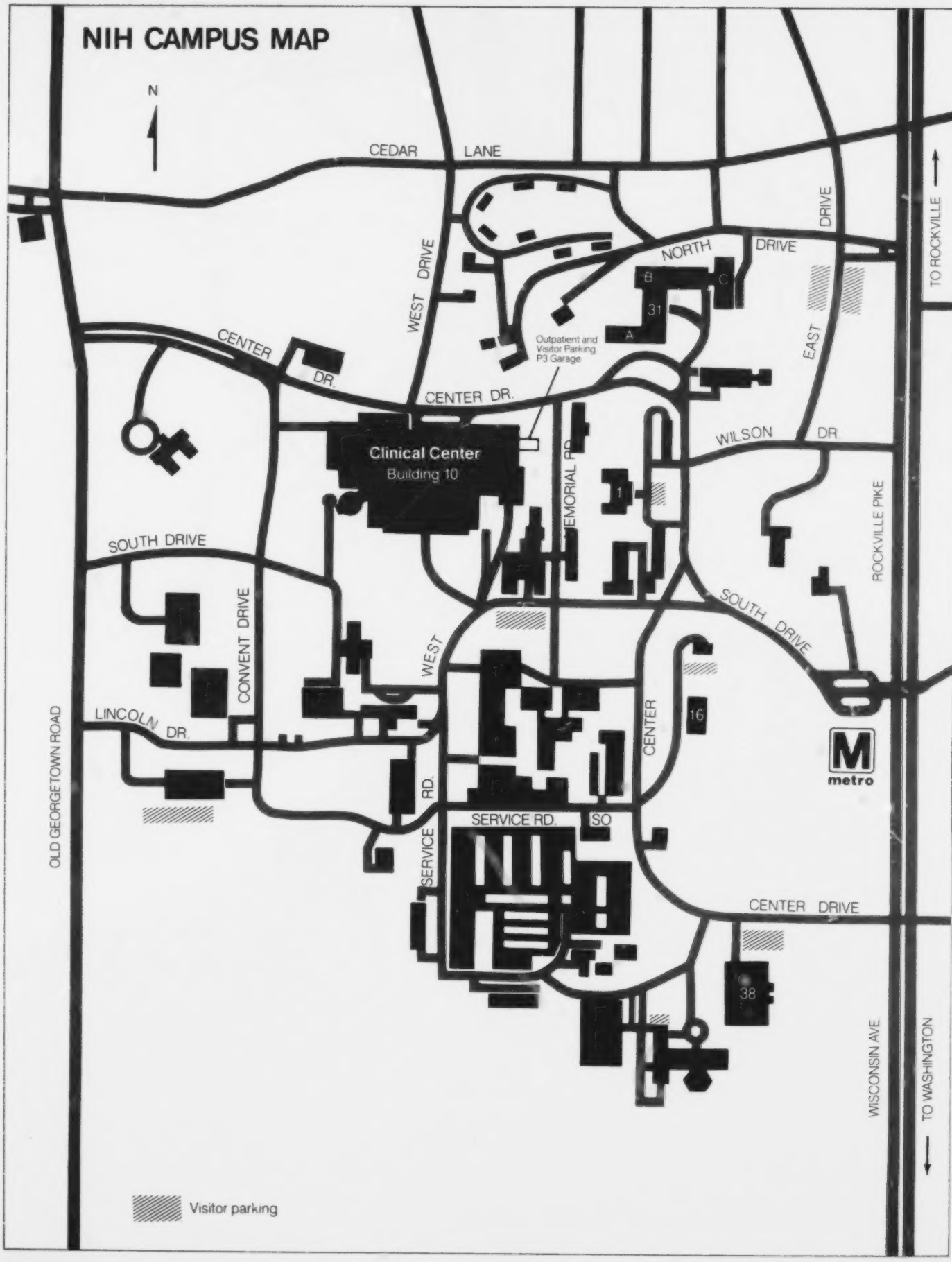
NIH CAMPUS MAP
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WEST DRIVE
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Outpatient and Visitor Parking P3 Garage
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MEMORIAL RD.
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WISCONSIN AVE
TO WASHINGTON
Visitor parking

Clinical Center Communications
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